PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUL L'EE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notificate	ed belôw or directed oth	ng the Patent, advance of nerwise in Block 1, by (orders and notification of a (a) specifying a new corre	maintenance fees w spondence address;	vill be mailed and/or (b) in	to the current dicating a separ	correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDS	Fee	(s) Transmittal. Thi	is certificate c	annot be used for	domestic mailings of the or any other accompanying at or formal drawing, must			
5514 FITZPATRICK 30 ROCKEFELI NEW YORK, N		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
							(Depositor's name)	
			<u> </u>		 		(Signature)	
			<u> </u>				(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR				CONFIRMATION NO.	
10/716,404 FITLE OF INVENTION DATA	11/20/2003 V: IMAGE PROCESSIN	NG APPARATUS AND	Takuma Mikawa METHOD FOR GENER	ATING AND DIS		003404, LAYLIST FOR	5539 IMAGE	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	E FEE TOT	AL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0		\$1810	03/16/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
SHIBRU, HELEN		2621	386-095000	- 				
CFR 1.363). Change of corresponders form PTO/SE "Fee Address" indirection PTO/SB/47; Rev 03-0 Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless Note:	ess an assignee is identi h in 37 CFR 3.11. Comp GNEE	Indication form led. Use of a Customer	(1) the names of up to or agents OR, alternatic (2) the name of a sing registered attorney or 2 registered patent attorned itsed, no name will be THE PATENT (print or tyed data will appear on the pot a substitute for filing an (B) RESIDENCE: (CITY	e of a single firm (having as a member a torney or agent) and the names of up to patent attorneys or agents. If no name is me will be printed. 2 Harper & Scinto 2 Harper & Scinto 3 If an assignment is identified below, the document has been filed for r filing an assignment. CE: (CITY and STATE OR COUNTRY)				
Canon Kabi	ıshiki Kaisha	Tokyo, J	apan					
Please check the appropri	ate assignee category or	categories (will not be p	printed on the patent):	Individual 🖾 Co	orporation or o	other private gro	up entity Government	
	are submitted: o small entity discount p of Copies	☐ A check is enclosed. ☐ Payment by credit car	nent of Fee(s): (Please first reapply any previously paid issue fee shown above) check is enclosed. ayment by credit card. Form PTO-2038 is attached. ne Director is hereby authorized to charge the required fee(s), any deficiency, or credit any verpayment, to Deposit Account Number 06-1205 (enclose an extra copy of this form).					
a. Applicant claims	tus (from status indicated s SMALL ENTITY statu	is. See 37 CFR 1.27.	☐ b. Applicant is no loned from anyone other than	ger claiming SMAL	LL ENTITY s	tatus. See 37 CF	R 1.27(g)(2).	
nterest as shown by the r	ecords of the United Sta	tes Patent and Trademark	k Office.	apprount, a rogi	· · · · · · · · · · · · · · · · · · ·			
Authorized Signature	Damel	Huck		DateFe	ebruary	2, 2009	·	
Typed or printed name	Daniel S.			Date Registration N				
n application Confident	iality is governed by 35.	U.S.C. 122 and 37 CFR	on is required to obtain or 1.14. This collection is es y depending upon the individual Chief Information Office	timated to take 12 n	ninutes to cor	nplete, including	gathering, preparing, and	

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.